



COLLIN COUNTY TASK FORCE ON INDIGENT HEALTH CARE

RECOMMENDATIONS TO THE COMMISSIONERS

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<p>1. Leadership The Collin County Health Care Foundation should assume a leadership role regarding indigent health care issues faced by greater Collin County.</p>	<p>The Collin County Health Care Foundation (Foundation) should assume the following leadership roles:</p> <p>A. Needs Assessment</p> <ol style="list-style-type: none"> 1. Determine and prioritize indigent health care needs and service gaps in the county by interfacing with elected officials, non-profit clinics, hospitals, physicians, school administrators, leaders from the faith community, and other community partners. 2. Monitor demographics (poverty rates, aging, etc.) and health care resources and delivery mechanisms in the county. 3. Monitor changes in health policy at the federal, state, and county levels (Medicare, Medicaid, CHIP, CIHCP, Regionalization, etc.). 4. Regularly analyze existing CIHCP patient data. This process may be facilitated by implementing a database which captures information on patients receiving services through the CIHCP. In addition to tracking a patient's treatment history, this system should also capture patient demographics. 5. Regularly monitor the financial cost and the effectiveness of the CIHCP and the grant programs. 6. Determine areas in the county specifically in need of primary care services for indigent patients but lacking non-profit providers. <p>B. Planning</p> <ol style="list-style-type: none"> 1. Create a mission statement for the Foundation. 2. Establish short-term and long-term indigent health care plans based on discrete, measurable objectives. 3. Regularly revise plans based on changes in epidemiologic and demographic information, or changes in county delivery mechanisms (<i>e.g.</i>, addition/loss of primary care clinics). <p>C. Coordination</p> <ol style="list-style-type: none"> 1. Act as a liaison with various entities, groups, and organizations within Collin County which provide indigent health care services or other services to indigent persons. 2. Foster relationship with the leadership or management of county-based health care groups, organizations, and

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	<p>other community partners (<i>e.g.</i>, faith community, related non-profits such as Meals-on-Wheels).</p> <ol style="list-style-type: none"> Facilitate cooperation and information exchange among various county-based groups and organizations which provide health care to indigent persons as well as other interested parties by hosting meetings or conferences. If possible, provide "Continuing Education" credit for health professionals to encourage attendance. Compile, maintain, and disseminate a listing of county-based health care resources which work with the medically indigent. In addition to printed materials, this might be accomplished by an Internet web site. Investigate the use of computer technology to link the county with other community partners which provide health services to indigent residents. <p>D. Education</p> <ol style="list-style-type: none"> Educate hospitals, non-profit clinics, physicians, school administrators, leaders from the faith community, and other community partners on the extent and availability of medical resources in the county. Develop community awareness of the <i>specific indigent health needs</i> in Collin County in order to foster support. Develop programs which inform the medically indigent of the medical resources available in the county and other state and federal resources (<i>e.g.</i>, Medicaid, CHIP) Provide to non-profit clinics information on the availability of city, county, state, and federal grants as well as grants from private foundations. Provide to new non-profit, health care directed agencies information on organizations which offer skill-building services such as grant-writing and budget processes (<i>e.g.</i>, United Way of Collin County, Center for Non-Profit Management in Dallas). Assist the County Commissioners on educating the public on important health policy issues in the county. <p>E. Advocacy, Communication, & Representation</p> <ol style="list-style-type: none"> Act as a liaison with various groups and organizations outside of Collin County which provide indigent health care services (<i>e.g.</i>, Project Access, Greater Dallas Fort Worth Association of Charitable Clinics, Dallas-Fort Worth Hospital Council, etc.). Act as a spokesperson for Collin County on health-related issues (<i>e.g.</i>, County needs versus regionalization).
<p>2. Expand base of input Increase the policy effectiveness of the Foundation through the</p>	<p>A. Add five new positions to the Foundation Advisory Board which would be designated as "Community Partner" positions. These positions should be drawn from leaders of the following groups:</p> <ol style="list-style-type: none"> Hospitals Physicians or other practitioners (Nurse Practitioner, Physician's Assistant)

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<p>addition of 5 Advisory Board positions which would be filled with health professionals and other leaders who have an interest in indigent health care.</p>	<ol style="list-style-type: none"> 3. Pharmacists 4. Faith community (<i>i.e.</i>, church pastor or priest, rabbi) 5. Board members or senior staff of non-profit organizations (Because of the potential conflict of interest, individuals from this group may be designated as non-voting members). <p>B. Foundation Advisory Board “Community Partner” appointment and tenure</p> <ol style="list-style-type: none"> 1. Community Partner positions should be “consensus appointments” of the Commissioners Court. 2. The tenure of Community Partner appointments would be limited to one year. <p>C. The use of community partners on the Advisory Board will assist the Foundation in the following ways:</p> <ol style="list-style-type: none"> 1. Identification of indigent and other public health needs in the county; 2. Prioritization of needs; 3. Assistance in fostering community partnerships; 4. Promotion of communication between various county groups and organizations which have an interest in indigent health care.
<p>3. Expand services Increase the primary care services available to poor residents in Collin County without changing the current eligibility guidelines for the CIHCP by expanding the existing grant program.</p>	<p>I. Expand the Foundation’s existing grant program through additional funding.</p> <p>A. Increase grant funding to non-profit organizations</p> <ol style="list-style-type: none"> 1. Out of 20 active task force members, 18 were present at the second round of small group meetings held in February and early March 2006. All members present indicated that the grant budget should be increased. The specific voting results were as follows: <ol style="list-style-type: none"> a. 33%: \$100,000 - \$200,000 increase over the \$200,000 currently budgeted. b. 44%: \$500,000 increase over the \$200,000 currently budgeted. c. 22%: \$800,000 increase over the \$200,000 currently budgeted 2. In order to reflect the wishes of the majority of the task force, the grant projections set forth on pages 9 – 10 were based on an annual budget of approximately \$700,000 (also includes administrative overhead). <p>B. Previous funding levels and awards</p> <ol style="list-style-type: none"> 1. The current budget amount for grants (2005 – 2006) is \$200,000. This amount does not include the \$40,000 annual allocation to Community Dental Clinic or approximately \$34,000 in free lease space provided to this clinic in McKinney and Plano.

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	<ol style="list-style-type: none"> 2. A list of grant recipients and award levels for the 2004-2005 budget is located on page 11. 3. For reference, the 2004-2005 Foundation Budget is located on page 11. <p>II. Expand the existing grant program to include three separate grant offerings which specifically target health delivery needs in Collin County:</p> <p>A. Primary Care Accessibility Grants (PCA) (see page 9 for budget example)</p> <ol style="list-style-type: none"> 1. Goals: (a) To increase the availability of primary care services in Collin County for indigent residents. In Collin County in 2005, there were over 15,000 patient visits to non-profit clinics by indigent persons who were not covered by any type of health insurance. Services to these patients were either provided on a sliding fee scale or at no charge. (b) To assist in the financial stabilization of non-profits in Collin County which provide primary care services to indigent residents; (c) To encourage the expansion of primary care service offerings to indigent patients during the work day (Monday through Friday, 9 am – 5 pm). 2. Plan: (a) 3-year grant program for qualifying non-profit clinics; (b) The Foundation would pay \$50 per patient visit up to a maximum number of visits per year. The attached budget projection sets the maximum number of funded visits for all non-profit clinics in the first year at 5000; (c) The Foundation will make payments for visits on a quarterly basis after receipt of the qualified agency's list of patient names, dates of visits, and other required information; (d) Payment will only be made for visits in which direct services were provided. Patient visits which result in immediate referral to another provider for services will not be eligible for reimbursement; 3. Non-profit eligibility: In order to be considered for PCA funding, an organization must meet all of the following criteria: (a) It must be a registered non-profit organization (501(c)(3)); (b) It must have a physical presence in Collin County and currently serve Collin County residents; (c) It must have a primary mission of providing basic health care services to indigent patients; (d) It must have been in continuous operation providing primary care services a minimum of six months; (e) It must be willing to screen patients for basic eligibility requirements; (f) It must agree to periodic audits by Foundation personnel. 4. Patient Eligibility: In order to claim a patient visit for payment, qualifying organizations must screen patients for the following: (a) Proof of Collin County residency; (b) Lack of coverage by any other form of health insurance (Medicare, Medicaid, CHIP, CIHCP, or private insurance); (c) Proof that the patient's household earnings are less than 200% of the Federal Poverty Guidelines--an income eligibility level that is consistent with that required for qualification by non-profit clinics and hospitals in Collin County which address the needs of the working poor. 5. Conditions: (a) Payments for PCA visits in the non-profit organization's fiscal year must not exceed 33% of

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	<p>their total annual budget revenues; (c) Patient records will be subject to periodic audit to insure accountability.</p> <p>B. Special Projects Grants (see page 9 for budget example)</p> <ol style="list-style-type: none"> Goals: (a) To promote the development of programs in the county that address <i>specifically determined and prioritized health-related needs</i> (see Section 1-A on page 1); (b) To facilitate within non-profit organizations the development of innovative programs that deal with specific health issues or otherwise promote wellness (<i>e.g.</i>, teaching parents about asthma treatment for their children, Project Independence at the Geriatric Wellness Center); (c) To encourage the development of health service provision in new areas of the county. Eligibility: In order to be considered for Special Projects funding, an agency must meet all of the following criteria: (a) It must be a registered non-profit organization (501(c)(3)); (b) It must have a physical presence in Collin County and currently serve Collin County residents; (b) It must have been in continuous operation a minimum of twelve months. Conditions: (a) Payments will be awarded annually to qualifying organizations; (b) Qualifying organizations will be subject to reporting requirements and outcome measurements; (c) Special consideration will be given to organizations which best address one or more of the prioritized health needs of Collin County. Exclusions: The Foundation will not provide special project grant funds for the following: (a) fundraising events; (b) operating deficits; (c) rent; (d) indirect costs; (e) items/services for which some type of third party reimbursement is available; (f) religious, political, or direct lobbying purposes; (g) legal fees; (h) medical or academic research. <p>C. Matching Funds Grants (see page 9 for budget example)</p> <ol style="list-style-type: none"> Goals: (a) To promote county-wide financial support of indigent health care; (b) To assist non-profit organizations in building diverse funding sources. Eligibility: In order to be considered for matching funds, an organization must meet all of the following criteria: (a) It must be a registered non-profit organization (501(c)(3)); (b) It must have a physical presence in Collin County and currently serve Collin County residents; (c) It must currently provide some type of health-related service to Collin County residents; (d) It must have been in continuous operation for more than six months but less than five years. Non-profit organizations which have been in operation more than five years may apply for a matching-funds grant for a special program which has been in existence for less than one year. Conditions: (a) Payments will be awarded annually to qualifying organizations; (b) Payment match will be limited to block donations from private businesses, civic organizations or consolidated offerings from churches, synagogues, or mosques; (c) Matching funds must be registered and approved in advance by the Foundation. Payment for a match will not exceed the registered amount; (d) Total grant payment under Matching Funds will

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	<p>be capped at pre-set amounts; (e) Organizations may not apply for matching funds to assist in payment for a program already funded by a Special Projects Grant; (f) Agencies receiving matching funds will be subject to audit for accountability.</p> <p>4. Exclusions: (a) Non-profit agencies which have a physical presence in Collin County but have an annual budget in excess of one million dollars; (b) Non-profit agencies which are nationally affiliated (<i>e.g.</i>, American Cancer Society, Susan G. Komen, American Heart Association, etc.); (c) Special programs will not be eligible for matching funds which are religious, political, or associated with direct lobbying purposes, which are raised to pay legal fees, or which are for medical or academic research; (d) in-kind donations.</p> <p>D. Other grant program considerations (see Sample Budget Dependency Projections on page 10)</p> <ol style="list-style-type: none"> 1. The Primary Care Assistance grant limits award amounts to no more than 33% of a non-profit organization's total annual budget revenues. No such limitation was placed on Special Projects or Matching Funds grants. 2. Non-profit organizations may apply and qualify for more than one type of Foundation grant offering. Because of this, every effort should be made to insure that Foundation grant funds provide a level of <i>financial assistance</i> without fostering dependence. 3. The Foundation should consider implementing the following guidelines: <ol style="list-style-type: none"> a. Cap total grant receipts in a given fiscal year at a specific percentage of the non-profit organization's actual budget revenues. For example, a non-profit organization's total grant receipts might be capped at 40% of its total annual budget revenues. b. In order to provide more support initially, the Foundation might choose to start with a higher annual cap and then reduce it by a specific percentage over a period of time. For example, total grants might be capped at 45% of the non-profit organization's budget revenues in 2007, 40% in 2008, and 35% in 2009. <p>Notes:</p> <p>Use of grant disbursements to improve health care services for indigent county residents is advantageous to Collin County for the following reasons:</p> <ol style="list-style-type: none"> 1. Unlike the CIHCP, a grant program could operate as a fixed budget line item. This would facilitate budget planning and cash flow management. In contrast, the CIHCP must provide services to all eligible residents up to a \$30,000 per person cap. Thus, cash flow management of the CIHCP is by nature variable and more difficult to estimate. Further expanding the CIHCP eligibility guidelines would also expand potential variation in expenditure.

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	<ol style="list-style-type: none"> 2. A grant program could be used in tandem with a strategic indigent health services delivery plan for Collin County. Grant funding could be attached to discrete, measurable goals and objectives. 3. The relative effectiveness of grants may be assessed. Programs that are working may be extended and/or expanded and those that are not may be altered or discontinued. 4. Use of a grant program is a logical extension of the non-profit status of the Foundation.
<p>4. Increase revenue Improve the revenue stream into the Foundation and eliminate annual losses.</p>	<p>A. Establish a committee which consists of community leaders with solid fundraising skills or potential who could act as “Friends of the Foundation.” Examples of the types of individuals who could fill these positions include:</p> <ol style="list-style-type: none"> 1. Leaders from local businesses and corporations 2. Representatives from local service organizations 3. Citizens with an interest and/or skill in fundraising <p>B. Other revenue sources should be pursued by:</p> <ol style="list-style-type: none"> 1. Soliciting donations from local individuals, businesses, the faith community, and service organizations. 2. Pursuing various local, state, and federal grant opportunities. <p>C. Provide annual general revenue support to the Foundation from the county general revenue fund.</p> <ol style="list-style-type: none"> 1. Allocate a portion of the general revenue fund to support health care in Collin County (indigent health care and public health). For example, 0.00523 of the Gross Revenue Tax Levy (GRTL) in Denton County is currently allocated to the county’s indigent health care program. Application of this factor to the 2005-2006 Collin County General Budget of \$150 million would produce approximately \$784,200 in additional support for the Foundation.
<p>5. Financial independence Make the Foundation finances independent from the county system.</p>	<p>A. Separate the Foundation finances from the overall county budget and accounting processes.</p> <ol style="list-style-type: none"> 1. Allows for greater flexibility in establishing an annual budget in keeping with the goals and objectives of the Advisory Board. 2. Facilitates reporting processes to the Advisory Board and to grant funding organizations which require copies of budgets and financial statements. 3. Makes the financial condition of the Foundation clearer to the Advisory Board and to community partners.

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<p>6. Implementation The Foundation should engage professional staff to carry out its mission.</p>	<p>Hire an Executive Director (and other support staff as necessary) who will have the following responsibilities:</p> <p>A. Coordination and planning</p> <ol style="list-style-type: none"> 1. Assessing the health needs in Collin County. 2. Establishing short-term and long-term health objectives for Collin County with the assistance of the Foundation Advisory Board and other county employees. 3. Facilitating coordination and cooperation between agencies and organizations which provide health care services to indigent residents in Collin County. 4. Developing community awareness of the health care needs of the indigent residents in Collin County <i>and</i> of the current resources available to address those needs. 5. Representing Collin County's indigent health care needs and resources to organizations outside the county. <p>B. Internal Foundation management</p> <ol style="list-style-type: none"> 1. Conducting regular Advisory Board meetings. 2. Recommending potential "community partner" candidates to the County Commissioners for appointment to the Foundation Advisory Board. 3. Regularly briefing the County Commissioners on the state of the Foundation. <p>C. Fund-raising</p> <ol style="list-style-type: none"> 1. Pursuing local, state, and federal grant opportunities. 2. Soliciting donations from local individuals, businesses, the faith community, and service organizations. <p>D. Grant programs</p> <ol style="list-style-type: none"> 1. Administering the Foundation grant programs. 2. Auditing the grant programs for compliance and accountability. <p>E. Reporting structure</p> <ol style="list-style-type: none"> 1. The Executive Director should report directly to the County Administrator. 2. The Collin County Health Care Advisory Board should provide input to the County Administrator on the job performance of the Executive Director.